



Commissioned Corps BULLETIN

Division of Commissioned Personnel • Program Support Center, DHHS

Vol. XIV, No. 2

February 2000

Surgeon General's Column

I had a series of childhood illnesses. The first was scarlet fever. Then I had pneumonia. Polio followed. I walked with braces until I was at least 9 years old. My life was not like the average person who grew up and decided to enter the world of sports.

— Wilma Rudolph

Few people are called to overcome the hurdles of a Wilma Rudolph, the first American woman to win three track-and-field gold medals at a single Olympic game (1960); nevertheless, all of us are encouraged to do what we can to stay healthy, including staying physically active and eating a nutritious diet.

By now, each of you should have received information pertaining to the Commissioned Corps' Healthy Lifestyles Initiative. Survey responses were due to be returned by January 31. Already, I am delighted with the enthusiasm and the response that the commissioned officers have shown in adopting this initiative, and I look forward to seeing and hearing about the results that regular physical activity will bring to your lives.

For 40 years, I have engaged in a regular physical activity program, consisting primarily of a combination of outdoor jogging and walking. Not only has it allowed me to enjoy the outdoors through the different seasons, but it has also contributed significantly to my level of energy, my clarity of thinking, my ability to solve problems, and my capacity for dealing with stress. Some would say—and I don't disagree—that I am addicted to regular physical activity. The benefits are extraordinary.

Physical Activity

The benefits of maintaining a regular physical activity are numerous, and recent studies have shown that physical activity need not be vigorous or continuous to produce health benefits. Moderate physical activity such as walking, biking, rollerblading, gardening, or aerobic dancing, to name a few, for 30 minutes a day, 5 days a week can improve health. If finding chunks of time to be physically active is a problem, then fitting it in intervals throughout the day may be the solution. The key to a successful plan is to work toward accumulating at least 30 minutes a day, 5 days a week.

The best available science continues to reveal the full value that physical activity can bring to our lives, from preventing disease and premature death to improving the overall quality of life. Regular physical activity substantially reduces the risk of dying of coronary heart disease, the Nation's leading cause of death, and it decreases the risk of colon cancer, diabetes, and high blood pressure, and it increases sexual potency. It can also enhance mental health by relieving stress and tension. In fact, the Nurses' Health Study, a 23-year-old study of more than 122,000 nurses, pioneered by Harvard University and Brigham and Women's Hospital, has yielded numerous studies showing how regular physical activity, along with nutrition, reduces the risk of ovarian and breast cancer and heart disease. In the elderly, a regular physical activity program can enhance quality of life by improving cognition and memory, reducing hip fractures, and reducing or delaying the onset of Alzheimer's disease.

Good Nutrition

When coupled with good nutritional habits, regular physical activity can reduce obesity, which has reached epidemic proportions in the United States, especially among women, children, and minorities. In fact, overweight and physical inactivity account for more than 300,000 premature deaths each year. In order to improve overall health and reduce the risk of disease, Americans should strive to eat a balanced diet low in fat and high in fiber. By eating at least five servings of fruits and vegetables a day, a person can significantly improve his or her health. For example, several hundred studies have shown that people who eat five or more servings of fruits and vegetables a day have shown significantly reduced risk of developing cancer than those who consumed few servings.

Science has also proven that fruits and vegetables help reduce the risk of cancer because they are rich sources of Vitamin A, Vitamin C, folate, fiber, and they contain many other compounds to promote good health, including micronutrients like selenium; antioxidants like carotenoids; and phytochemicals like

(Continued on page 2)

IN THIS ISSUE . . .

CCRF Column	2
New Mileage Rate	3
PAC Web Site Addresses	6
Reminder! Important Notice: Transfer of Leave To and From Civil Service is Not Authorized	7

Surgeon General's Column

(Continued from page 1)

indols, isothiocyanates, flavonoids, phenols, allium compounds, and limonene. These nonnutritive phytochemicals work by repairing cellular damage and preventing the oxidation of certain chemicals to active carcinogens in the body.

The good news is that you do not have to join a fitness club or forego tasty meals to stay fit and healthy. Even small changes in lifestyle, such as parking further away from your destination, taking the stairs instead of elevators, getting off the bus or subway a few stops early, choosing fruits and nuts instead of candy or chips, or opting for juice instead of soda.

Helpful Web Sites

For more information on nutrition and fitness information, visit the Surgeon General's web site at www.surgeon-general.gov or the 5 a Day web site at <http://5aday.gov> which was developed by the National Cancer Institute and the Centers for Disease Control and Prevention.

I look forward to building on the Corps' already impressive achievements and to making this an even more progressive and vital part of our Nation's service. While we may never win the status of the fastest woman in the world, we can individually and collectively be the best that we can be, which, when that happens, is nothing short of remarkable.

ADM David Satcher
Assistant Secretary for Health
and Surgeon General



Commissioned Corps Readiness Force

Y2K Response

In response to the potential threats surrounding Y2K, the Secretary directed that all Operating Divisions (OPDIVs) make appropriate preparations to mitigate and respond to health and medical related emergencies. The Federal Emergency Management Agency (FEMA) also issued a supplement to the Federal Response Plan for the Public Health Service's Office of Emergency Preparedness to be prepared to deploy Emergency Support Functions #8 (Health and Medical Services) resources in accordance with the Federal Response Plan. The Commissioned Corps Readiness Force (CCRF) was activated by the Surgeon General to adequately respond to public health consequences of any possible Y2K incident.

The mission assignments for CCRF members ranged from key interagency liaison duties with FEMA's Emergency Support Team (EST) or the Federal Bureau of Investigation's (FBI) Special Intelligence Operations Center (SIOC), to international health and medical assessment, to augmentation of existing National Disaster Medical System assets. Showing true esprit de corps, officers and OPDIVs alike rallied to respond if needed. The CCRF Command Staff would like to offer sincere gratitude to all those officers who volunteered for the alert roster.

Guatemala Deployment

In mid-December, a ship carrying illegal Chinese migrants was detained in Guatemala. The CCRF was activated to provide assistance to the Immigration and Naturalization Service's Division of Immigration Health Services. CAPT Barbara Hsu-Trawinski and LCDR Astrid Szeto were deployed to Guatemala under adverse circumstances to provide critically needed medical interpreter support.

Hurricane Floyd

A previous article on the CCRF response to post-hurricane flooding in North Carolina inadvertently omitted the names of three CCRF Environmental Health Officers. While these CCRF officers were deployed directly by the Indian Health Service Emergency Coordinator's office under an older

mechanism, the CCRF Command Staff would like to gratefully acknowledge their dedicated support of the response to Hurricane Floyd—CDR David Mosier, LCDR Mark Pike, and LT Brian Hroch.

Response Coordinator

LCDR Lynn Slepski will be joining the CCRF Command Staff as the Response Coordinator. She will assume the responsibilities of managing the intricate details of each response, and will also be responsible for managing the Ready Response Rosters. The addition of LCDR Slepski to the CCRF Command Staff will allow the Command Staff to aggressively pursue an educational and training agenda as well as other program development activities.

Ready Response Rosters

The Ready Response Rosters are in the final stages of development. These rosters will be submitted to the Chief Professional Officers (CPOs) and OPDIV/Program Liaisons for approval prior to emergencies. Members of each Ready Response Roster will represent the available pool of officers that could be offered the opportunity to be deployed during a specified 2-month period. It will be the responsibility of individual officers to periodically check the rotational schedule and to notify the CCRF Command Staff if, for any reason, they need to change their readiness status. CPOs, OPDIV/Program Liaisons, and civilian employers of Ready Reservists should also notify the CCRF staff of amendments to the rosters as their needs change or as conditions affecting the officer's ability to deploy are known.

If you are aware of any significant (personal or professional) activity dates, please let us know and we will try to take those into consideration as we develop the pools. Any conflicts identified after the roster pools are developed and approved by the CPOs and OPDIV/Program Liaisons may be much more difficult to consider. Any conflicts must be brought to the attention of the CCRF Command Staff immediately. Further updates regarding the Ready Response Rosters will be available on the CCRF web site: <http://oep.osophs.dhhs.gov/ccrf>

(Continued on page 3)

Commissioned Corps Readiness Force

(Continued from page 2)

Uniforms

The basic uniform items of the CCRF will be the Field Utility Uniform and the Working Khaki. These uniforms will best meet the requirements of the great variety of missions that CCRF will be assigned. Thanks to everyone who participated in the discussions both by e-mail and via the CCRFTALK Listserv. The CCRF Command Staff is working on a distinct identifying insignia that will be presented to the uniform board for authorization to be worn on the CCRF uniforms as well as the CCRF T-shirt and command ball cap. More to come later regarding uniforms, but at a time to be determined in the future, all CCRF members will be required to have all appropriate uniforms.

Field Medical Readiness Badge (FMRB)

The FMRB Review Committee has completed its review of FMRB applications. For a complete list of FMRB recipients, please see the "What's New" section of the CCRF web site: <http://oep.osophs.dhhs.gov/ccrf>

Officers whose applications were not approved at this time will receive an individual letter providing an explanation of the specific deficiencies found in their application and the appropriate corrective action. Officers will be given an opportunity to correct those deficiencies and resubmit their applications for consideration under the existing FMRB criteria.

CCRF Website

All CCRF members should visit the CCRF web site frequently to check for news and to update any changes to personal information: <http://oep.osophs.dhhs.gov/ccrf>

It is particularly important to update any changes in address or phone number, passport information, and CPR certification.

All members should also subscribe to the CCRF Listserv in order to receive the most up-to-date CCRF news messages via e-mail. To do so, click on "Listserv" from the CCRF Home Page. The CCRF Command Staff may be reached by e-mail at: ccrf@osophs.dhhs.gov.

□

A First for PHS Commissioned Corps Engineers



(Pictured left to right) CAPT Thomas Bedick, Chair, Engineer Professional Advisory Committee; CAPT Gladys Rodriguez; and RADM Robert C. Williams, Chief Engineer Officer.

In a ceremony held on December 9, 1999, the Chief Engineer and the Engineer Professional Advisory Committee recognized CAPT (select) Gladys Rodriguez as the first female officer in the Engineer category to be promoted to the rank of Captain. Her promotion was effective January 1, 2000.

CAPT Rodriguez graduated in 1974 with a bachelors degree in engineering. Her Public Health Service (PHS) career began in 1980 with the Food and Drug Administration (FDA) as a regulatory officer with medical and industrial x-rays. She has served in several capacities of regulatory enforcement, including review of ultraviolet and mercury vapor lamps and lasers, and is currently the Deputy Director, Division of Enforcement III in the Center for Devices and Radiologic Health, FDA.

RADM Robert C. Williams, Chief Engineer Officer, noted he was privileged to be a part of this recognition ceremony. In his remarks, he discussed the importance of the occasion and compared it to other 'firsts' throughout the history of women in engineering. He concluded with, "Today, we celebrate the women of engineering in the past who were ground breakers for CAPT Rodriguez and other women; today, we celebrate the achievements of our first female Captain engineer and how it measures a strengthening of our Corps; and today, we launch the dreams of some young women who will be PHS engineers in the future. A career of commitment and dedication earned CAPT Rodriguez her place to stand today, and may our celebration of her achievement be an equally remarkable move of the men and women engineers of the PHS into the 21st Century."

□



New Mileage Rate

Effective January 14, the mileage reimbursement rate for Federal employees who use privately owned vehicles for temporary duty (TDY) rose from 31 cents to 32.5 cents, largely a reflection of higher gasoline prices. The change parallels the new Internal Revenue Service standard

mileage rate for tax deductibility purposes, which rose from 31 cents to 32.5 cents effective January 1, 2000. The reimbursement rates for using personal motorcycles and airplanes when performing TDY, 26 cents and 88 cents per mile respectively, have stayed the same.

□

Obituary—RADM Lucile Petry Leone, USPHS (Ret.), 1902-1999



Lucile Petry Leone in her Public Health Service Commissioned Corps uniform in the 1940's.

RADM Lucile Petry Leone, USPHS (Ret.), the first Chief Nurse Officer of the Public Health Service (PHS), died at her home in San Francisco on November 25, 1999. She was 97 years of age. Her distinguished career in PHS spanned 25 years, and she is probably best remembered by many American nurses as the Director of the Cadet Nurse Corps during the 1940's.

Born on January 23, 1902, in Lewisburg, Ohio, she received her bachelors degree in 1924 and her nursing diploma in 1927. She served as Head Nurse and Supervisor at the Johns Hopkins Hospital from 1927 to 1929. She received a masters degree in 1929, and after a brief appointment at the Yale University

School of Nursing she was recruited by the University of Minnesota School of Nursing where she remained on the faculty until 1941. She also served as Assistant Dean of the School during her last 5 years there.

In the summer of 1941, Petry was called to Washington, D.C., by Surgeon General Thomas Parran. With the Nation increasingly concerned about the possibility of the U.S. becoming involved in World War II, Surgeon General Parran wanted her to work on a program aimed at recruiting more nurses for both civilian and military needs and hired her as a consultant in nurse education for the PHS. By 1943, when the U.S. was deeply embroiled in the war, it was recognized that there was a need for a more formal and expanded program for recruitment of nurses. The Nurse Training Act of July 1, 1943, created the Cadet Nurse Corps which was administered by the newly created Division of Nurse Education in the PHS. Petry was appointed Director of the unit, the first woman to head a major PHS division. The Cadet Nurse Corps program provided tuition, fees, room and board, books, and a monthly stipend to students who were enrolled in schools of nursing and who committed themselves to working in military or civilian nursing for as long as the war lasted. By the time that the program ended in 1948, it had trained some 124,000 nurses, and the program also contributed significantly to improving resources and standards at schools of nursing.

Petry was one of the first nurses to be commissioned in the PHS when the commissioned corps was opened to nurses in 1944. After the Cadet Nurse Corps was

phased out, Petry was appointed in 1949 as the first Chief Nurse Officer of the PHS. She was also promoted at that time to Assistant Surgeon General – Rear Admiral. She was the first woman to achieve this rank in any of the country's Uniformed Services. During her tenure as Chief Nurse Officer, RADM Petry was influential in developing the research movement in nursing.

In 1952, she married a fellow PHS commissioned officer, Dr. Nicholas C. Leone, and became Lucile Petry Leone.

When she retired from the PHS in 1966, RADM Leone accepted a position as Professor at the College of Nursing of Texas Woman's University in Dallas. From 1968 until her retirement in 1971, she also served as Associate Dean of the College of Nursing. Not content to remain retired, she served as Coordinator of International Students and Visitors at the University of California, San Francisco School of Nursing from 1977 to 1982, when she was given emeritus status.

RADM Leone had an impressive record of publications and speeches and was an active participant in professional activities. Her importance to nursing was recognized through numerous awards and honors, including ten honorary doctorates. Perhaps reflecting back on her experience with the Cadet Nurse Corps, in 1988 Petry commented that most of all in her lifetime she had "learned that the same spirit engendered by a Nation's expectations in times of crisis and the nurses' response in meeting these needs still prevails. Millions of people live in better health as a result."

□

CAPT Richard Taffet Retires

CAPT Richard Taffet, who held the position of Deputy Director, Division of Commissioned Personnel (DCP) from February 1, 1992 through November 15, 1999, retired effective February 1, 2000.

CAPT Taffet was called to active duty on July 1, 1969, and his first assignment was as a hospital pharmacy resident at the Public Health Service (PHS) Hospital in Baltimore, Maryland. He later served as the Chief Pharmacist, Admin-

istrative Officer, and eventually Director of the PHS Outpatient Clinic in Detroit, Michigan. After completing a hospital administration residency in Baltimore, he was assigned as the Director of the PHS Outpatient Clinic in Cleveland, Ohio.

His assignments in DCP included: staffing officer for the physician and pharmacist categories in the Officer Development Branch; commissioned per-

sonnel management specialist in the Officer Services Branch; and Chief of the Transactions and Applications Branch.

CAPT Taffet's extensive knowledge of the Corps, his helpfulness, his attention to detail, and his good humor will be missed. We extend our sincere 'thank you for a job well done' and hearty congratulations to CAPT Richard M. Taffet, USPHS (Ret.)!

□

Environmental Health Officer PAC Seeks Nominations

The Environmental Health Officer Professional Advisory Committee (EHOPAC) is seeking nominations for membership. All interested environmental health commissioned officers and civil service employees including junior officers (temporary grade O-3 and below) and civil service employees (GS-9 and below) with less than 5 years experience are encouraged to submit a self-nomination form.

Self-nomination forms are available from the EHOPAC web site astdr.cdc.gov/SPAC or by contacting LCDR Don Williams at the address below.

EHOPAC members serve up to two 3-year terms and meet quarterly; the summer meeting is held in conjunction with the National Environmental Health Association annual conference.

A curriculum vita should accompany the self-nomination form and may be submitted by mail, fax, or electronically to:

LCDR Don Williams
EHOPAC Membership Committee
7900 South J. Stock Road
Tucson, AZ 85746
Phone: 520-295-2580
Fax: 520-295-2409
E-mail: Donald.Williams@mail.his.gov



DCP WEB SITE ADDRESS—
<http://dcp.psc.gov>

DCP Toll-Free Phone Number—
1-877-INFO DCP
(1-877-463-6327)

Subscribe to Listserv to Receive
E-mail Messages from DCP—
listserv@list.psc.dhhs.gov



Meet the New Flag Officer



RADM José F. Cordero

On September 1, 1999, José F. Cordero was promoted to Rear Admiral, Public Health Service (PHS).

RADM Cordero has been the Deputy Director, National Immunization Program (NIP), Centers for Disease Control and Prevention (CDC), since 1994. In this role he has overseen, along with the Director, the implementation of the Childhood Immunization Initiative, the Vaccines for Children Program, and global polio eradication activities.

RADM Cordero received a bachelor of science degree in 1969, a doctor of medicine degree in 1973, and a masters degree in Public Health in 1979. He trained in pediatrics at Boston City Hospital and Massachusetts General Hospital, and completed a Fellowship in Pediatrics and Human Genetics at the Harvard Center for Human Genetics. In 1979, he joined CDC's Epidemiologic Intelligence Service and was assigned to the Birth Defects Branch of the then Bureau of Epidemiology.

During his tenure at CDC, he has led numerous projects. His first field investigation assignment was to determine the cause of metabolic alkalosis in a

group of infants in a southeastern State. The investigation found that infants were consuming an infant formula deficient in chloride and that it was a nationwide concern. At the time there was no requirement for infant formulas to contain all the needed nutrients for infants to thrive. That finding led to the Infant Formula Act of 1980 which ensures that all foods intended to be the sole nourishment of infants must contain all nutrients needed for optimal growth and development.

RADM Cordero has also conducted numerous studies related to birth defects prevention including the risk of spermicides during pregnancy, and the use of multivitamins to prevent neural tube defects. More recently, he has focused his research interest in rubella control and eradication, the first preventable and eradicable birth defect. He has been the CDC's focal point on the Presidential Race Initiative efforts to ensure that all minorities are immunized on time. In his tenure as Deputy Director of NIP, he has overseen the National Immunization Survey, the first and largest random-digit-dialing ever in the health field. This survey has provided the basis to monitor immunization coverage by State and local areas and has documented the highest immunization coverage ever in the U.S. He has also overseen CDC's effort to develop community-based immunization registries.

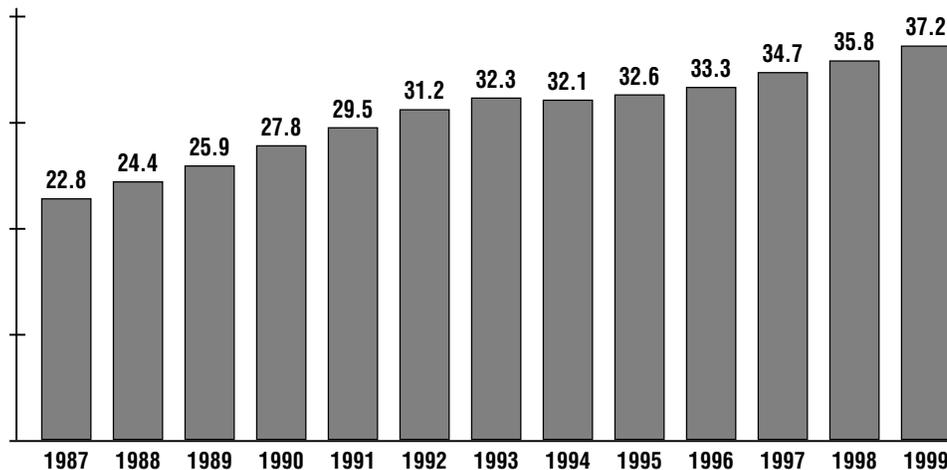
In 1988, RADM Cordero received the Arthur S. Flemming Outstanding Government Scientist Award. He is a regular corps officer and has received the PHS Meritorious Service Award and other PHS awards. He is a diplomate of the American Board of Pediatrics and the American Board of Medical Genetics. In 1996, RADM Cordero was elected President of the Teratology Society, and was elected to the Governing Council of the American Public Health Association from 1995 to 1997. He has served on the Editorial Board of the Teratology Journal and has served as consultant to the Pan American Health Organization, the World Health Organization, and national, State, and local organizations.



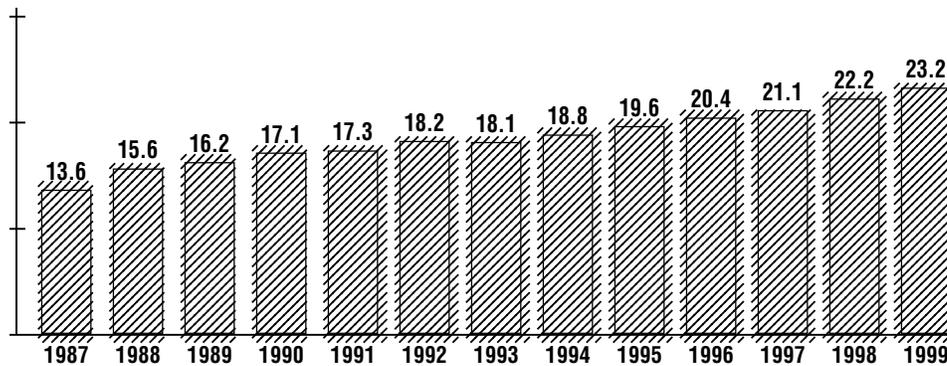
Public Health Service Commissioned Corps

(As of September 30th of each of the years listed.)

PERCENTAGE OF WOMEN – 63 PERCENT INCREASE OVER 1987



PERCENTAGE OF MINORITIES – 71 PERCENT INCREASE OVER 1987



PHS Commissioned Corps Officer's Appeal Board

In 1979, Congress authorized the establishment of the Board for Correction of Public Health Service Commissioned Corps Records to provide a mechanism for the correction of errors or injustices in the service records of present and former members of the commissioned corps. Applicable regulations pertaining to the Board are found in INSTRUCTION 9, Subchapter CC49.1 of the Commissioned Corps Personnel Manual. This regulation is available on the Division of Commissioned Personnel's web site: <http://dcp.psc.gov>

For further information about the process, please request a pamphlet entitled "Board for Correction of Public Health Service Commissioned Corps Records" from:

Executive Secretary
Board for Correction of
PHS Commissioned Corps Records
5600 Fishers Lane, Room 17A-12
Rockville, MD 20857-0001
Phone: 301-443-6268
Fax: 301-443-1169
E-mail: TWhite@psc.gov

Hispanic Officers Advisory Committee

The Hispanic Officers Advisory Committee (HOAC) of the Public Health Service (PHS) announces that its web site (presently under construction) can be visited at: <http://pages.ivillage.com/misc/jeg001/index.html>

PHS commissioned officers of Hispanic heritage as well as all other interested persons are welcome to visit and get information about HOAC, its purpose, and its plans for the future.

For additional information, contact CDR Julio García at 301-594-3466 or LT Jannette O'Neil-González at 301-594-4160.



PAC Web Site Addresses

The following are web site addresses for Public Health Service Professional Advisory Committees (PAC):

MEDICAL Category - Physicians PAC

www2.ihs.gov/ppac

DENTAL Category - Dental PAC

www.ihs.gov/nonmedicalprograms/phs/PHSDental/index.htm

NURSE Category - Nursing PAC

www.hhs.gov/progorg/nursing

ENGINEER Category - Engineer PAC

www.usphsengineers.org

SCIENTIST Category - Scientist PAC

www.scipac.nimh.nih.gov/scientist

ENVIRONMENTAL HEALTH Category - Environmental Health Officer PAC

www.atsdr.cdc.gov/SPAC

VETERINARY Category - Veterinary PAC

www.fda.gov/cvm/vcc

PHARMACY Category - Pharmacy PAC

www.hhs.gov/progorg/pharmacy

DIETETICS Category - Dietitian/Nutritionist PAC

www.cdc.gov/niosh/diet/dietpac.html

THERAPY Category - Therapist PAC

www.cc.nih.gov/rm/pt/tpac.htm

HEALTH SERVICES Category - Health Services PAC

www.ihs.gov/nonmedicalprograms/phs/Hso/index.asp



Vacancy Announcements

The following vacancies are provided as representative of opportunities currently available to Public Health Service Commissioned Corps officers. If you have questions pertaining to the announcements listed below, please call the contact listed.

Any Operating Division/Program wishing to list a vacancy in this column should send a written request to: Division of Commissioned Personnel, ATTN: Vacancy Announcements Project Officer/ODB, Room 4A-18, 5600 Fishers Lane, Rockville, MD 20857-000—or phone: 301-594-3458 or 301-594-3360 (toll-free at 1-877-INFO-DCP—listen to the prompts, select option #1, dial 43360) or Fax: 301-443-7069.

Category/OPDIV

Description of Position

MEDICAL

COAST GUARD—
Mobile, AL

Medical Officer
Contact: CAPT Michael Wiemers 202-267-2073
Grades: O-3/O-4/O-5
Board certified in primary care preferred. Flight surgeon preferred, but will train.

INDIAN HEALTH SERVICE—
Wind River, WY

Medical Officer
Contact: CDR John Klinkenborg 307-332-7300
Grades: O-3/O-4/O-5
Seeking board certified/board eligible family physician to join seven physician group for nonobstetrics clinic practice with admission privileges to private hospital. Position available July 2000.

NURSE

NATIONAL INSTITUTES OF HEALTH—
Bethesda, MD

Clinical Nurse
Contact: Ms. Maureen Estrin 1-800-732-5985
Grades: O-2/O-3/O-4

ENGINEER or ENVIRONMENTAL HEALTH

NATIONAL PARK SERVICE—
Washington, DC

Assistant Chief, Office of Public Health
Contact: CAPT John J. Hanley 202-565-1117
Grade: O-5
A bachelor of science degree in environmental health or engineering (or related field) plus 5 years of experience with 2 years of recent fieldwork—emphasis on potable water, wastewater management, food service operations, and vector control / communicable disease surveillance. Professional registration (PE, RS, REHS or equivalent) is mandatory. Frequent travel.

NATIONAL PARK SERVICE—
Seattle, WA

Regional Public Health Service Officer
Contact: CAPT John J. Hanley 202-565-1117
Grade: O-6
A masters degree in environmental health or engineering (or related field) plus 8 years of experience with 2 years of recent fieldwork—emphasis on potable water, wastewater management, food service operations, and vector control / communicable disease surveillance. Professional registration (PE, RS, REHS or equivalent) is mandatory. Frequent travel.

MULTIDISCIPLINARY

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY—
Rockville, MD

Program Planning and Development Officer
Contact: Ms. Patti Brown 301-594-2408
Grades: O-5/O-6
This position is located in the Office of the Director within the Planning, Development and Evaluation Staff. This office is responsible for the development, implementation, general management, and oversight of Agency-wide planning, program development, and evaluation activities.

Reminder

IMPORTANT NOTICE— Transfer of Leave To or From Civil Service is Not Authorized

In a legal opinion dated October 14, 1999, the Business and Administrative Law Division, Office of the General Counsel, advised the Division of Commissioned Personnel that INSTRUCTION 3, Subchapter CC29.1, "Transfer of Leave Between Commissioned Corps and Other Federal Leave Systems," of the Commissioned Corps Personnel Manual (CCPM) is based on an outdated law. The PHS Commissioned Corps Personnel Act of 1960 changed the status of the commissioned corps from a civilian component to a Uniformed Service. **As a result of the change in the law, the transfer of leave between the Public Health Service Commissioned Corps and civil service personnel system is not authorized.**

Transmittal Sheet No. 646, dated December 22, 1999, rescinded INSTRUCTION 3, Subchapter CC29.1 from the CCPM. This transmittal was sent to all active-duty officers at their duty station addresses.

For more information, please refer to page 3 of the December 1999 issue of the *Commissioned Corps Bulletin*.

Recent Deaths

The deaths of the following retired officers were reported to the Division of Commissioned Personnel:

Title / Name	Date
NURSE	
CAPT Anne R. Gibbons	12/18/99
CDR Arlene M. Waldhaus	10/05/99
ENGINEER	
CAPT Thomas R. Johnson, Jr.	12/24/99
CAPT Warren F. Smith	12/19/99
CAPT Gordon E. Stone	12/07/99
SCIENTIST	
CAPT Daniel G. Brown	12/30/99
CAPT John E. Lane	01/03/00
ENVIRONMENTAL HEALTH	
CAPT Charles J. Hart	12/15/99
VETERINARY	
CAPT Karl R. Reinhard	01/02/00

Retirements - January

<i>Title / Name</i>	<i>OPDIV / Program</i>	<i>Title / Name</i>	<i>OPDIV / Program</i>	<i>Title / Name</i>	<i>OPDIV / Program</i>
MEDICAL		Charles A. Strott	NIH	Stephen R. Schmit	IHS
<i>REAR ADMIRAL</i>		Bernard Talbot	NIH	ENGINEER	
Donald H. Luecke	NIH	Chou-Chik Ting	NIH	<i>CAPTAIN</i>	
Phillip Gorden	NIH	Robert B. Wainwright	CDC	Ralph L. Hogge	IHS
<i>CAPTAIN</i>		Reed B. Wickner	NIH	Winston A. Smith	EPA
Jeffery L. Barker	NIH	Berton Zbar	NIH	SCIENTIST	
Richard O. Cannon	NIH	<i>COMMANDER</i>		<i>CAPTAIN</i>	
Thomas N. Chase	NIH	Lemuel B. Clark	SAMHSA	Roland A. Garcia	HRSA
Robert W. Coberly	IHS	DENTAL		James R. King	FDA
George T. Curlin	NIH	<i>CAPTAIN</i>		Neil L. Sass	FDA
Jeffrey P. Froehlich	NIH	Eric D. Bothwell	IHS	Robert Spirtas	NIH
Mitchell H. Gail	NIH	<i>COMMANDER</i>		PHARMACY	
Ronald E. Gress	NIH	Lydia N. Smith	BOP	<i>CAPTAIN</i>	
Sherman M. Harman	NIH	<i>LIEUTENANT COMMANDER</i>		Delbert G. Martin	IHS
William L. Heyward	CDC	Joseph D. Budd	BOP	Kay C. Pearso	AHRQ
Thomas Hoffman	FDA	NURSE		<i>COMMANDER</i>	
Bruce H. Howard	NIH	<i>REAR ADMIRAL</i>		Gary L. Nelson	IHS
Stephen J. Marx	NIH	K. Lothschuetz Montgomery	NIH	David A. Olson	IHS
Ernest L. A. Moise	HRSA	<i>CAPTAIN</i>		HEALTH SERVICES	
James J. Mond	NIH	Nancy J. Devlin	HRSA	<i>CAPTAIN</i>	
Richard J. O'Brien, Jr.	CDC	Margaret J. DiClemente	HRSA	Ronald G. Freeman	IHS
Stephen B. Permison	HRSA	James C. McCann	HRSA	Clyde E. Moss, Jr.	CDC
John B. Robbins	NIH	Rebecca S. Stanevich	CDC	C. Bruce Smith	NIH
Norman E. Rosenthal	NIH				
Ronald H. Schwartz	NIH				

Chief Pharmacy Officer

A call for nominations by the Office of the Surgeon General and the Division of Commissioned Personnel (DCP) is in progress for the selection of a new Chief Professional Officer for the Pharmacy category. The present Chief Pharmacy Officer's term will end on May 31, 2000.

Nominations must be submitted by Operating Divisions/Programs, but pharmacy

officers who are interested in the position should peruse the criteria in INSTRUCTION 6, "Chief Professional Officer Nomination Criteria and Selection Process," Subchapter CC23.4 of the Commissioned Corps Personnel Manual (CCPM). The CCPM is available on DCP's web site: <http://dcp.psc.gov>

After reviewing the criteria, interested officers should contact their Surgeon

General's Policy Advisory Council Representative and/or Operating Division/Program Commissioned Corps Liaison.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Program Support Center
Human Resources Service
Division of Commissioned Personnel, Room 4A-15
Rockville MD 20857-0001

Official Business
Penalty for Private Use \$300

BULK RATE
POSTAGE AND FEES PAID
PSC
PERMIT NO. G-280

REDISTRIBUTION
USING PERMIT IMPRINT
IS ILLEGAL

DATED MATERIAL